

# AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS

TYPE:

☒ IXC

☒ CLEC

☐ ILEC

☐ Wireless

2011-29-A

229971 CN

jm

## CERTIFICATED COMPANY INFORMATION

PNG Telecommunications, Inc.

Company Name

d/b/a PowerNet Global Communications;

513-645-4891

Db/a/fka

Telephone #

100 Commercial Drive

Mailing Address

Fairfield, OH 45014

City, State, Zip Code

Business Location

Butler

City, State, Zip Code

County

## REGISTERED AGENT INFORMATION

Registered Agent: Corporation Service Company

Mailing Address: 1703 Laurel Street

City, State, Zip Code: Columbia, SC 29201

Pursuant to the Commission's rules and regulations, print or type company contact for the following areas:

A. Karen Kovach, General Counsel  
**General Manager** (Include address if different than above.)  
 513-645-4933 / 513-645-4960 / kkovach@pngmail.com  
 Telephone Number Facsimile Number E-mail Address

B. Julie Dollenmayer  
**Customer Relations /Complaints Representative** (Include address if different than above.)  
 513-645-4891 / 513-645-4960 / jdollenmayer@pngmail.com  
 Telephone Number Facsimile Number E-mail Address

C1. Julie Dollenmayer  
**Customer Relations/Complaints Representative for Escalated Complaints** (Include address if different than above.)  
 / /  
 Telephone Number Facsimile Number E-mail Address

C2. 877.599.3087  
**Customer Contact (Toll Free Number)**

D. **Engineering Operations** (Include address if different than above.)  
 / /  
 Telephone Number Facsimile Number E-mail Address

E. **Test and Repair** (Include address if different than above.)  
 / /  
 Telephone Number Facsimile Number E-mail Address

MAY 2011  
 UTILITY OFFICE

F.

**Emergencies** (During non-office hours)

Telephone Number

Facsimile Number

E-mail Address

**In addition, please provide the following company contact information to assist in proper routing of correspondence and invoices:**

G.

Julie Dollenmayer

**Regulatory Officer** (Include address if different than above.)

513-645-4891

513-645-4960

jdollenmayer@pngmail.com

0

Telephone Number

Facsimile Number

E-mail Address

H.

**Dual Party Mailings** (Name)

Mailing Address

Telephone Number

Facsimile Number

E-mail Address

I.

**Interim LEC Fund Mailings** (Name)

Mailing Address

Telephone Number

Facsimile Number

E-mail Address

J.

**Universal Service Fund Mailings** (Name)

Mailing Address

Telephone Number

Facsimile Number

E-mail Address

K.

**Gross Receipts Mailings** (Name)

Mailing Address

Telephone Number

Facsimile Number

E-mail Address

L.

**Lifeline Mailings** (Name)

Mailing Address

Telephone Number

Facsimile Number

E-mail Address

Julie Dollenmayer

This form was completed by (print name)

Corporate & Regulatory Specialist

Title

*Julie Dollenmayer*

Signature

5/20/2011

Date

RETURN COMPLETED FORM TO:

Public Service Commission of SC  
**Clerk's Office**  
Post Office Drawer 11649  
Columbia, South Carolina 29211

Office of Regulatory Staff  
**Attn: Jeanne Gordon**  
1401 Main Street, Suite 900  
Columbia, South Carolina 29201

(Rev. PSC 11/2010)